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Bib Data Sheet

CONFIRMATION NO. 6486

SERIAL NUMBER 10/720,460	FILING DATE 11/24/2003 RULE	CLASS 435	GROUP ART UNIT 1656	ATTORNEY DOCKET NO. 2352.002
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APPLICANTS
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WS

** CONTINUING DATA *****
 This application is a CIP of PCT/JP01/10234 11/22/2001
WS

** FOREIGN APPLICATIONS *****
 JAPAN 2001-156088 05/24/2001
WS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 04/05/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY JAPAN	SHEETS DRAWING 14	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 9
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TITLE
 Novel SMG-1

FILING FEE RECEIVED 1286	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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